

#### REPORT OF RECEIPTS APPENDITURES OF A POLITICAL COMMIT

State Form 4606 (R9 /11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT? Yes No

(CFA-4) Summary Sheet

TOTAL PAGES IN ENTIRE CFA-4 REPORT

COMMITTEE INFO	RMATION		
1. Full name of committee (as on Statement of Organization) Check if this is a new nar CALL BARDACH THE BEST JUDGE FOR CARMEL	COMMITTE		
2. Acronym or abbreviated name, if any	3. Committee telep	844-0195	
Mailing address (address where all campaign finance correspondence is received)	Check if this is a new ad	dress	roses, reducin Espair in reducing any adaptives ad
5. City, state, ZIP code (ARMEL IN 4-6082	6. Party affiliation (	if applicable)	MOMENTA NA STATEN Bandhada someonaky
CANDIDATE INFORMATION (For Cal	ndidate's Committee	es Only)	
7. Full name of candidate (include any nickname)	8. Party affiliation of KEPUBL	or if independent	trose e Entar the NA com of Organization (Form CF.
Office sought (Include district number, if any. Not required for exploratory committee.)	10. County of resid	I CAN	ITEM 2 Ericle this actions
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:  Pre-Primary Pre-Election Annual Final / Disbands Committee (lines 18, 19, Outgoing Treasurer (within 10 days amend Statement of Organization)	and 20 must be "0")	Check one:  Pre-Convention  Post-Convention	
12. Reporting period: From: 1 1 2001 Through: 12 31 200  13. Cash on hand and investments at the beginning of this reporting period.	01	COLUMN A This Period	COLUMN B Year to Date
14. Cash on hand and investments January 1, current year.			-0-
CONTRIBUTIONS AND RECEIPTS	MENTS OF STREET		
(Note: these amounts include in-kind contributions and loans, as well as cash cor	ntributions.)		
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15b. Unitemized	esse de, the candida	-0-	-0-
15c. Add lines 15a, and 15b in both columns	SUBTOTAL	-0-	-0-
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B  EXPENDITURES	TOTAL	- 0 - 11110	-0-
	TOTAL	-0-	-0-
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(Note: These amounts include in-kind expenditures and loan repayments.)	TOTAL	-0-	-0-
(Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)	SUBTOTAL	- 0 - - 0 - - 0 -	- 0 - - 0 - - 0 -
(Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)  17b. Unitemized  17c. Add lines 17a and 17b in both columns	SUBTOTAL	- 0 - - 0 - - 0 -	- 0 - - 0 - - 0 - - 0 -
(Note: These amounts include in-kind expenditures and loan repayments.)  17a. Itemized (use Schedule B) (Public Question: use Schedule C)  17b. Unitemized	SUBTOTAL	-0- -0- -0- -0- 5,696,48	- 0 - - 0 - - 0 - - 0 -

#### CERTIFICATION

I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS

Signature on File

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose.

(IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

FOR OFFICE USE ONLY





#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMIT

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-/ SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVE RECEIVED BY
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#### REPORT OF RECEIPTS AND FXPENDITURES OF A POLITICAL COMMITT

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CFA-4 CHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED BY
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#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMIT

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-/ CHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

#### Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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#### REPORT OF RECEIPT: ND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

# (CI 4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfersin and in-kind contributions regardless of the amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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#### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMIT

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

#### (CFA-/ SCHEDULE A-5) CON RIBUTIONS BY OTHER ORGANIZATIONS

#### Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDMIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributior, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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### REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMIT :

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

#### (CFA-4 SCHEDULE B) Itemized Expenditures

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	schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM
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l	other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200,
Į	if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political
l	committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees)
	MIIST be itemized on this schedule.

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
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State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES

For Public Questions

FILE NUMBER					
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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

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#### REPORT OF RECEIPTS A EXPENDITURES OF A POLITICAL COMMIN. ZE

State Form 4606 (R9 / 11-99) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

### FA-4 SCHEDULE D) Debts Owed by This Committee

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lending institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
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LENDERS OCCUPATION:	negation in Equa government about for Origination Att.	SUB TOTAL	THIS PAGE OF S	CHEDULE D	\$5,196,48
04 19 of the Summary Sheet	TOTAL OF ALL (Enter total on I	PAGES OF SCHEDULE TEM 19 of the Summary	D ON THE LAST Sheet)	24.05.01111	\$5,696.48



#### REPORT OF RECEIPTS ) EXPENDITURES OF A POLITICAL COMMITTEE

(CF 4 SCHEDULE E)
DEBTS OWED TO THIS COMMITTEE

State Form 4606 (R9 / 11-99)	
Indiana Election Commission (10	C 3-9-5-14)
Approved by State Board of Acco	ounts 1999

FILE NUMBER					
	1				
Page	1 01 1				

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. List all debts, loans, regardless of amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

BORROWER'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER'S NAME AND MAILING ADDRESS( if any) (street, number, city state, ZIP code)	ORIGINAL AMOUNT  NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
i used for this educatule. The and mailing address of	d page of two page (8; Enter the full ner given a loan within	is page in the second MAILING ADDRESS ring committee has	D'angein ai MA SMA MA COM	ROWER'S	POS a enti
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		LL PAGES OF SCHEDULE I on ITEM 20 of the Summary		PAGE ONLY	-0-